FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

	Important: R	ead the instructions on pa	ges 1 - 7.			
BUILDING OWNER'S NAME	SECTION A -	PROPERTY OWNER INFORM	ATION	For Insurance Company Use:		
- TRED WILLIA	Ms Home	BUILDER INC	Ronald. Bouzer	Policy Number		
BUILDING STREET ADDRESS (Includin	g Apr., Unit, Suite, and/	or Bldg. No.) OR P.O. ROUTE AND		Company NAIC Number		
LOOLER.		GASTATI		ZIP CODE 31322		
PROPERTY DESCRIPTION (Lot and BIO	ck Numbers, Tax Parce	Number, Legal Description, etc.)	7	Ti- 12		
BUILDING USE (e.g., Residential, Non-re	sidential, Addition, Acco	essory, etc. Use Comments section	n if necessary.)	SE IV B		
LATITUDE/LONGITUDE (OPTIONAL)	HORIZONTA					
(##° - ##' - ##.##" or ##.####")		LINAD 1983	_ GPS (Type): USGS Quad Mag			
			_ 0303 Q030 Map	Other:		
SE	CTION B - FLOOD I	NSURANCE RATE MAP (FIRM	I) INFORMATION			
81. NEIP COMMUNITY NAME & COMMU		B2. COUNTY NAME				
TOWN OF POOLER 1	30261	CHATHAM		B3. STATE GA		
130261 0075 B5. SUFFIX	DATE 09-30-81	87. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)		
	and Flourties (PCF)	05-19-87	<u>AE</u>	12.0		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. FIS Profile Community Determined Other (Describe):						
811. Indicate the elevation datum used	for the BEE in B9: In	M NGVD 1030 1 12/02/03	M			
B12. Is the building located in a Coasta Designation Date:	Barrier Resources	System (CRRS) area or Orba-	is [] Other (De	scribe):		
Designation Date:		System (OBING) area or Otherw	ise Protected Are	a (OPA)? ∐ Yes ⊠No		
SECTION	ON C - BUILDING E	EVATION INCORMATION IS	170.4734			
ilding elevations are based on: [Construction Draw	EVATION INFORMATION (SU				
A new Elevation Certificate will be	required when const	vings* Building Under	Construction*	Finished Construction		
C2. Building Diagram Number / (S	elect the building dia	gram most similar to the building	ete.			
C2. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)						
55. Elevations – Zones Al-A30, AE, AF	I. A (with BEE) VE \	/1-\/30 \/ (with DEE) AD AD/	ADIAE ADIA	***		
Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used, If the datum is different from						
The series of the Dr. C in Occord D. Converting name in the theory is a first of the converting of the						
and approximate of the Continuents area of Section 1) or Section C. on approximate the design of the continuents are designed as a continuent are design of the continuents are designed as a continuent are designed as a						
	Comments	NE	as oppropriate, to	document the datum conversion.		
Elevation reference mark used		Does the elevation reference m	ark used appear	on the FIRM? _ Yes > No		
a) Top of bottom floor (including	basement or enclosu	re) 20 .	1_ ft.(m) 👼 🗀			
a by top of next higher floor						
a c) Bottom of lowest horizontal str	uctural member (V z	ones only)	ft.(m) % =	GREGISTERES		
☐ d) Attached garage (top of slab)			Entropassed (1917)	1 / ARC (C) 4		
 e) Lowest elevation of machinery servicing the building 	and/or equipment	10 -	7. 9.	No. 2743		
☐ f) Lowest adjacent grade (LAG)			<u>e_</u> ft.(m) 월훏	1- W.7-		
g) Highest adjacent grade (HAG)			tr.(m) tr. (m) tr. (m) tr. (m) tr. (m) tr. (m)	J. 72 62 2 1		
□ h) No. of permanent openings (flo	and variety within 4 A		_ ft.(m) 👸 📉	SURVE S		
Total area of all permanent ope	nings (flood voets) is	001		PINES M. KEA		
		The state of the s	sq. cm)	07/0//0/		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.						
inis certification is to be signed and sea	iled by a land survey	or, engineer, or architect author	rized by law to cer	rtify elevation information.		
The state of the s						
ERTIFIER'S NAME						
ames M. Keaton, PL		LICENS	SE NUMBER			
Land Surveyor Chatham Surveying Sarvices Inc						
DORESS 0. Box 61649		CITY	STATE	Inc.		
IGNATURE M. + PLS		ovannah, Georgia 3	1420 TELEPHONE			
No Form 81-31, AUG 99	• •	04-07-01	(912) 303-	0302		
reso villors L. Allty 99	SEE DEVENO	CAIDCOLL				

IMPORTANT: In these space	ces, copy the corresponding info	mation from Section	1 A	Estimation Company
BUILDING STREET ADDRESS	(Including Apt, Unit, Suite, and/or Bidg.	No I OR P.O. ROUTE A	ND BOX NO	For Insurance Company Use. Policy Number
219 CASSII	STAT	E	ZIP CODE	Company NAIC Number
FOOLER		COA	3/322	Company NAIC Number
SEC	TION D - SURVEYOR, ENGINEER,	OR ARCHITECT CE	RTIFICATION (CON	TIMILEDY
Copy both sides of this Elevan	tion Certificate for (1) community off	ficial (2) Insurance as	out/company and /2	\ hildia
COMMENTS A	1	iciai, (2) insurance ag	enucompany, and (3) building owner.
Money.	MK.		-	
DESCRIPTION OF THE PARTY				Check here if attachment
SECTION E - BUILDING	ELEVATION INFORMATION (SUR	VEY NOT REQUIRE	D) FOR ZONE AO 21	nd ZONE A (WITHOUT BFE)
ror zone AO and zone A (with information for a LOMA or LOM	out BFE), complete Items E1 throug AR-F, Section C must be completed.	jh E3. <i>if the El</i> evation	Certificate is intende	ed for use as supporting
E1. Building Diagram Number	(Select the building diagram	most similar to the bul	lding for which this c	adificate is being completed
see pages o and 7. If no d	liagram accurately represents the bu	Jilding, provide a sketo	ch or photograph.)	ertificate is being completed -
=2. The top of the bottom floor	(including basement or enclosure) of			.(cm) [_] above or [_] below
check one) the highest ad, (check one) the highest ad,	pacent grade. I do depth number is available, is the	top of the barrow floa	e olougead :d	and the state of t
noouplain management ord	inance? Yes No U	nknown. The local of	ficial must certify this	Information in Section G
SECT	TON F - PROPERTY OWNER (OR	OWNER'S REPRESE	NTATIVE) CERTIFI	CATION
The property owner or owner's community-issued BFE) or Zor	s authorized representative who com ne AO must sign here.	npletes Sections A. B.	and E for Zone A (w	ithout a FEMA-issued or
PROPERTY OWNER'S OR OWN	ER'S AUTHORIZED REPRESENTATIV	E'S NAME		
DRESS	t.	CITY	STATE	ZIP CODE
SIGNATURE	Total Williams	DATE	TELEPHO	NE
COMMENTS		·		
	1.07			
	SECTION G - COMMUNI	TY INFORMATION (DETIONAL)	_ Check here if attachments
ne local official who is authorize	ed by law or ordinance to administer	the community's floo	delais managament	adianas en assolata
conoris A. D. C (b) E), and G o	i mis elevation certificate. Complet	e the applicable item/	s) and gion holow	
1. [] The information in Secti	on C was taken from other documer	ntation that has been :	slaned and embosse	d by a licensed surveyor,
engineer, or architect w elevation data in the Co	ing is authorized by state or local lav	w to certify elevation in	nformation, (Indicate	the source and date of the
2. A community official cor	npleted Section E for a building loca	ated in Zone A (withou	r a FEMA-issued or	community issued RCE) or
Zune AU.				community-issued BrE/ of
	n (Items G4-G9) is provided for com	nmunity floodplain mar	nagement purposes.	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DAT	E CERTIFICATE OF C	OMPLIANCE/OCCUPANCY
7. This permit has been issued	for: New Construction	Substantial Improver	ment	
3. Elevation of as-built lowest fl	oor (including basement) of the build	ding is:		ft.(m) Datum;
	f flooding at the bullding site is:			ft.(m) Datum:
OCAL OFFICIAL'S NAME	777	TITLE		
OMMUNITY NAME		TELEPHONE		***************************************
IGNATURE		DATE		
MENTS				
<i></i>				
				J.
			í	Check here if attachments
144 5 04 04 144 04				_ THOUR HOTE IT ALL CONTINUES